

**IN THE UNITED STATES DISTRICT COURT FOR THE  
WESTERN DISTRICT OF MISSOURI**

Sease Michael Beard 1251289 )  
(full name) (Register No.) )

Plaintiff(s).

Case No. \_\_\_\_\_

v.

Doris Falkenrath JCCC (moo) Warden )  
(Full name) )  
Nathan Falter <sup>CO III</sup> At Jefferson City )  
Correctional Center )  
Defendant(s).

Defendants are sued in their (check one):  
\_\_\_\_ Individual Capacity  
\_\_\_\_ Official Capacity  
☒ Both

**COMPLAINT UNDER THE CIVIL RIGHTS ACT OF 42 U.S.C. § 1983**

I. Place of present confinement of plaintiff(s): Jefferson City Correctional Center

II. Parties to this civil action:  
Please give your commitment name and any another name(s) you have used while incarcerated.

A. Plaintiff Sease Michael Beard Register No. 1251289  
Address 8200 No More Victims Road

B. Defendant See Attachment II.B. Defendants  
Is employed as \_\_\_\_\_

For additional plaintiffs or defendants, provide above information in same format on a separate page.

## II.B. Defendants

Jeremy Epps was employed as a sergeant, Correctional Officer II at Jefferson City Correctional Center for the State of Missouri During time of incident.

Calderon is employed as a correctional Officer I at Jefferson City Correctional Center for the State of Missouri.

III. Do your claims involve medical treatment? Yes ☒ No ☐

IV. Do you request a jury trial? Yes ☒ No ☐

V. Do you request money damages? Yes ☒ No ☐

State the amount claimed? \$ \_\_\_\_\_ / \_\_\_\_\_ (actual/punitive)

VI. Are the wrongs alleged in your complaint continuing to occur? Yes ☐ No ☒

VII. Grievance procedures:

A. Does your institution have an administrative or grievance procedure? Yes ☒ No ☐

B. Have the claims in this case been presented through an administrative or grievance procedure within the institution? Yes ☒ No ☐

C. If a grievance was filed, state the date your claims were presented, how they were presented, and the result of that procedure. (Attach a copy of the final result.)

See Attachment C1-89

D. If you have not filed a grievance, state the reasons.

VIII. Previous civil actions:

A. Have you begun other cases in state or federal courts dealing with the same facts involved in this case? Yes ☐ No ☒

B. Have you begun other cases in state or federal courts relating to the conditions of or treatment while incarcerated? Yes ☐ No ☒

C. If your answer is "Yes," to either of the above questions, provide the following information for each case.

(1) Style: \_\_\_\_\_  
(Plaintiff) (Defendant)

(2) Date filed: \_\_\_\_\_

- (3) Court where filed: \_\_\_\_\_
- (4) Case Number and citation: \_\_\_\_\_
- (5) Basic claim made: \_\_\_\_\_
- (6) Date of disposition: \_\_\_\_\_
- (7) Disposition: \_\_\_\_\_  
(Pending) (on appeal) (resolved)
- (8) If resolved, state whether for: \_\_\_\_\_  
(Plaintiff or Defendant)

For additional cases, provide the above information in the same format on a separate page.

IX. Statement of claim:

- A. State here as briefly as possible the facts of your claim. Describe how each named defendant is involved. Include the names of other persons involved, dates and places. Describe specifically the injuries incurred. Do not give legal arguments or cite cases or statutes. You may do that in Item "B" below. If you allege related claims, number and set forth each claim in a separate paragraph. Use as much space as you need to state the facts. Attach extra sheets, if necessary. Unrelated separate claims should be raised in a separate civil action.

See Attachment IX Statement of Claim #1-23

- B. State briefly your legal theory or cite appropriate authority:

See attachment IX Statement of Claim # 24-28

X. Relief: State briefly exactly what you want the court to do for you. Make no legal arguments.  
See Attachment ~~29-35~~ X. Prayer For Relief 29-35

XI. Counsel:

A. If someone other than a lawyer is assisting you in preparing this case, state the person's name. DAirian Stanley #1264521

B. Have you made any effort to contact a private lawyer to determine if he or she would represent you in this civil action? Yes ☒ No ☒


If your answer is "Yes," state the names(s) and address(es) of each lawyer contacted.

C. Have you previously had a lawyer representing you in a civil action in this court? Yes \_\_\_\_\_ No ☒

If your answer is "Yes," state the name and address of the lawyer.

**I declare under penalty of perjury that the foregoing is true and correct.**

Executed (signed) this 31<sup>st</sup> day of October 2021.

  
Signature(s) of Plaintiff(s)